


City, Town, or Plantation	Lamoine
Street or Road	Walker Rd
Subdivision, Lot #	Crawford, Cameron
PROPERTY OWNERS NAME	
ie (last, first, MI) Alfred Erick	
<input type="checkbox"/> Owner <input checked="" type="checkbox"/> Applicant	
Mailing Address of Owner/Applicant	PO Box 65 Hancock ME 04640
Daytime Tel. #	207-546-1388

Town/City	LAMOINE	Permit #	1758
Date Permit Issued	3/17/15	Fee: \$	40.00
		Double Fee Charged []	
Local Plumbing Inspector Signature		L.P.I. #	1040

The Internal Plumbing Fixtures and Piping shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing system in accordance with this application and the Maine Internal Plumbing Rules.

OWNER OR APPLICANT STATEMENT
 I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.
Alfred Erick
 Signature of Owner or Applicant 3-11-15
 Date

CAUTION: INSPECTION REQUIRED
 I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules.

 Local Plumbing Inspector Signature _____
 Date Approved (Final)

PERMIT INFORMATION

This Application Is For 1. <input checked="" type="checkbox"/> NEW PLUMBING INSTALLATION 2. <input type="checkbox"/> RELOCATED PLUMBING	Type of Structure To Be Served 1. <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 2. <input type="checkbox"/> MODULAR OR MOBILE HOME 3. <input type="checkbox"/> MULTIPLE FAMILY DWELLING 4. <input type="checkbox"/> OTHER-SPECIFY _____	Plumbing To Be Installed By 1. <input checked="" type="checkbox"/> MASTER PLUMBER 2. <input type="checkbox"/> MFG'D HOUSING DEALER/MECHANIC 3. <input type="checkbox"/> PUBLIC UTILITY EMPLOYEE 4. <input type="checkbox"/> PROPERTY OWNER LICENSE # 114131311
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Hook-Up & Piping Relocation Maximum of 1 Hook-Up	Number	Column 2 Type of Fixture	Number	Column 1 Type of Fixture
<input type="checkbox"/> HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District OR <input type="checkbox"/> HOOK UP: to an existing subsurface wastewater disposal system		Hosebibb / Sillcock		Bathtub (and Shower)
		Floor Drain	1	Shower (Separate)
		Urinal		Sink
<input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures		Drinking Fountain	1	Wash Basin
		Indirect Waste	1	Water Closet (Toilet)
		Waste Treatment Softener, Filter, etc.		Clothes Washer
		Grease / Oil Separator		Dish Washer
		Dental Cuspidor		Garbage Disposal
		Bidet		Laundry Tub
		Other: _____		Water Heater
OR <input type="checkbox"/> TRANSFER FEE (\$10.00)		Fixtures (Subtotal) Column 2	13	Fixtures (Subtotal) Column 1
			3	Total Fixtures
			40	Fixture Fee
				Transfer Fee
				Hook-Up & Relocation Fee
			40.00	Permit Fee (Total)